

## California Medicare Advantage and Cost Prescription Drug Plans

\*The beneficiary drug premium covers prescription drugs only. Medicare Advantage plans also cover Medicare medical and hospital benefits, and supplemental benefits. Plan premiums vary for these benefits. Beneficiaries generally are responsible for the Part B premium.

Includes contracts/plans approved as of September 25, 2005. The data does not reflect information for Plans offering Part B only services, some demonstrations, PACE organizations, employer sponsored plans, or plans that were not approved by the "As of" date of the chart.

Organization Name	Plan Name	Percent Beneficiaries with Access to Plan in State	Beneficiary Drug Premium *	Type of Medicare Advantage Plan				Cost Plans	Drug Deductible			Includes Tiered Copayments for Drugs	Type of Additional Coverage Offered in Coverage Gap		Mail Order Offered	Number of Top 100 Drugs on Formulary
				HMO	Local PPO	Regional PPO	Private Fee-for-Service		Zero	Reduced	Standard (\$250)		Generics Only	Generics and Brands		
Aetna Health of California, Inc.	Aetna Golden Medicare Premier Plan	2%	\$0.00	•					•			•	•		•	95
	Aetna Golden Medicare Premier Plan	25%	\$0.00	•					•			•	•		•	95
	Aetna Golden Medicare Premier Plan	6%	\$0.00	•					•			•	•		•	95
	Aetna Golden Medicare Premier Plan	8%	\$0.00	•					•			•	•		•	95
	Aetna Golden Medicare Premier Plan	4%	\$0.00	•					•			•	•		•	95
	Aetna Golden Medicare Value Plan	2%	\$26.50	•							•	•			•	82
	Aetna Golden Medicare Premier Plan	2%	\$50.84	•					•			•	•		•	95
BC LIFE & HEALTH INSURANCE COMPANY	Freedom Blue Plan I	100%	\$7.00			•			•			•			•	88
	Freedom Blue Plan II	100%	\$22.00			•			•			•			•	88
Blue Cross Of California	SmartValue Plus	6%	\$19.46				•				•	•			•	88
	SmartValue Plus	1%	\$19.46				•				•	•			•	88
	SmartValue Plus	1%	\$19.46				•				•	•			•	88
Blue Shield of California	Blue Shield 65 Plus	33%	\$0.00	•					•			•		•	•	81
	Blue Shield 65 Plus	10%	\$0.00	•					•			•			•	81
	Blue Shield 65 Plus Value Plan (Partial)	0%	\$0.00	•					•			•		•	•	87
California Health Plan	California Medicare Advantage	33%	\$0.00	•					•			•		•	•	94
	CareMore Value Plus	33%	\$0.00	•					•			•		•	•	94
	California Medicare Advantage PPO	33%	\$6.34		•				•			•		•	•	94
Central Health Medicare Plan	Central Health Medicare Plan	25%	\$0.50	•					•			•		•	•	96
Chinese Community Health Plan	CCHP Senior Plan	3%	\$2.00	•					•			•			•	76
	CCHP Senior Select Program	3%	\$21.66	•							•				•	76
Citizens Choice Healthplan	Citizens Choice Healthplan	25%	\$0.00	•					•			•		•	•	69
Health Net Life Insurance Company	Health Net Options Plus	8%	\$14.66		•				•			•			•	96
Health Net Of CA	Health Net Seniority Plus	10%	\$0.00	•					•			•	•		•	96
	Health Net Seniority Plus	45%	\$0.00	•					•			•			•	96
	Health Net Seniority Plus	45%	\$14.28	•							•	•			•	96
	Health Net Seniority Plus	8%	\$14.66	•					•			•			•	96
	Health Net Seniority Plus	0%	\$14.66	•					•			•			•	96
	Health Net Seniority Plus	4%	\$14.66	•					•			•			•	96
	Health Net Seniority Plus	1%	\$14.66	•					•			•			•	96
	Health Net Seniority Plus	8%	\$14.66	•					•			•			•	96
	Health Net Seniority Plus	7%	\$14.66	•					•			•			•	96
	Health Net Seniority Plus	3%	\$14.66	•					•			•			•	96
	Health Net Seniority Plus	5%	\$14.66	•					•			•			•	96
	Health Net Seniority Plus	2%	\$14.66	•					•			•			•	96
	Health Net Seniority Plus	3%	\$14.66	•					•			•			•	96
Inter Valley Health Plan	Service To Seniors	35%	\$0.00	•					•			•			•	89
Kaiser Permanente	Kaiser Permanente Senior Advantage	4%	\$0.00	•					•			•	•			65
	Kaiser Permanente Senior Advantage	6%	\$0.00	•					•			•	•			65
	Kaiser Permanente Senior Advantage	4%	\$0.00	•					•			•	•			65
	Kaiser Permanente Senior Advantage	4%	\$0.00	•					•			•	•			65
	Kaiser Permanente Senior Advantage	3%	\$0.00	•					•			•	•			65
	Kaiser Permanente Senior Advantage	1%	\$0.00	•					•			•	•			65
	Kaiser Permanente Senior Advantage	2%	\$0.00	•					•			•	•			66
	Kaiser Permanente Senior Advantage	6%	\$0.00	•					•			•	•			66
	Kaiser Permanente Senior Advantage	8%	\$0.00	•					•			•	•			66
	Kaiser Permanente Senior Advantage	8%	\$0.00	•					•			•	•			66
	Kaiser Permanente Senior Advantage	2%	\$0.00	•					•			•	•			66
	Kaiser Permanente Senior Advantage	4%	\$0.00	•					•			•	•			66
	Kaiser Permanente Senior Advantage	25%	\$0.00	•					•			•	•			66
	Kaiser Permanente Senior Advantage	2%	\$15.96	•					•			•	•			65
	Kaiser Permanente Senior Advantage	1%	\$15.96	•					•			•	•			65
	Kaiser Permanente Senior Advantage	3%	\$15.96	•					•			•	•			65
	Kaiser Permanente Senior Advantage	2%	\$15.96	•					•			•	•			65
	Kaiser Permanente Senior Advantage	2%	\$15.96	•					•			•	•			65
	Kaiser Permanente Senior Advantage	2%	\$15.96	•					•			•	•			65
Medcore HP	Medcore Gold SNP with Cost Share	2%	\$14.21	•							•				•	76
	Medcore Gold	2%	\$26.77	•					•			•			•	76
Molina Healthcare of California	Molina Advantage	35%	\$23.25	•							•					85
OneCare	OneCare	8%	\$22.79	•							•					86
POSITIVE HEALTHCARE	POSITIVE HEALTHCARE PARTNERS	25%	\$18.37	•							•				•	83
San Mateo Health Commission	HPSM CareAdvantage	2%	\$19.97	•							•					93

## California Medicare Advantage and Cost Prescription Drug Plans

\*The beneficiary drug premium covers prescription drugs only. Medicare Advantage plans also cover Medicare medical and hospital benefits, and supplemental benefits. Plan premiums vary for these benefits. Beneficiaries generally are responsible for the Part B premium.

Includes contracts/plans approved as of September 25, 2005. The data does not reflect information for Plans offering Part B only services, some demonstrations, PACE organizations, employer sponsored plans, or plans that were not approved by the "As of" date of the chart.

Organization Name	Plan Name	Percent Beneficiaries with Access to Plan in State	Beneficiary Drug Premium *	Type of Medicare Advantage Plan				Cost Plans	Drug Deductible			Includes Tiered Copayments for Drugs	Type of Additional Coverage Offered in Coverage Gap		Mail Order Offered	Number of Top 100 Drugs on Formulary
				HMO	Local PPO	Regional PPO	Private Fee-for-Service		Zero	Reduced	Standard (\$250)		Generics Only	Generics and Brands		
SCAN Health Plan	SCAN Health Plan	2%	\$11.00	•					•			•	•		•	90
	SCAN Health Plan	2%	\$12.00	•					•			•	•		•	90
Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	25%	\$0.00	•					•			•			•	81
	Secure Horizons Classic Plan	6%	\$0.00	•					•			•			•	81
	Secure Horizons Enhanced Value Plan	25%	\$0.00	•					•			•	•		•	81
	Secure Horizons Classic Plan	4%	\$0.00	•					•			•			•	81
	Secure Horizons Classic Plan	8%	\$0.00	•					•			•			•	81
	Secure Horizons Classic Plan	2%	\$0.00	•					•			•			•	81
	Secure Horizons Classic Plan	8%	\$0.00	•					•			•			•	81
	Secure Horizons Premier Plan	8%	\$0.00	•					•			•			•	81
	Secure Horizons Value Plan	8%	\$0.00	•					•			•			•	81
	Secure Horizons Value Plan	8%	\$0.00	•					•			•			•	81
	Secure Horizons Classic Plan	0%	\$13.11	•					•			•			•	81
	Secure Horizons Classic Plan	4%	\$13.11	•					•			•			•	81
	Secure Horizons Classic Plan	3%	\$15.99	•					•			•			•	81
	Secure Horizons Classic Plan	3%	\$16.03	•					•			•			•	81
	Secure Horizons Classic Plan	4%	\$16.03	•					•			•			•	81
	Secure Horizons Classic Plan	1%	\$16.18	•					•			•			•	81
	Secure Horizons Classic Plan II	4%	\$17.31	•					•			•			•	81
	Secure Horizons Classic Plan	4%	\$17.73	•					•			•			•	81
	Secure Horizons Classic Plan	2%	\$18.60	•					•			•			•	81
	Secure Horizons Classic Plan	1%	\$19.06	•					•			•			•	81
	Secure Horizons Classic Plan	1%	\$20.63	•					•		•	•			•	81
	Secure Horizons Classic Plan	2%	\$21.55	•					•		•	•			•	81
	Secure Horizons Classic Enhanced Plan	6%	\$22.99	•					•			•	•		•	81
	Secure Horizons Classic Enhanced Plan	25%	\$22.99	•					•			•	•		•	81
	Secure Horizons Classic Plan III	8%	\$22.99	•					•			•			•	81
	Secure Horizons Classic Enhanced Plan	8%	\$23.00	•					•			•	•		•	81
	Secure Horizons Classic Enhanced Plan	8%	\$23.00	•					•			•	•		•	81
	Secure Horizons Classic Enhanced Plan	4%	\$23.00	•					•			•	•		•	81
	Secure Horizons Classic Plan	1%	\$23.00	•					•			•			•	81
	Secure Horizons Classic Plan	1%	\$23.00	•					•			•			•	81
	Secure Horizons Classic Plan	3%	\$23.00	•					•			•			•	81
	Secure Horizons Classic Plan	0%	\$23.00	•					•			•			•	81
	Secure Horizons Classic Plan	2%	\$23.00	•					•			•			•	81
	Secure Horizons Classic Plan II	25%	\$23.00	•					•			•			•	81
	Secure Horizons Enhanced Value Plan	8%	\$23.00	•					•			•	•		•	81
	Secure Horizons Gold Plan	25%	\$23.00	•							•				•	81
	Secure Horizons Gold Plan	8%	\$23.00	•							•				•	81
	Secure Horizons Gold Plan	10%	\$23.00	•							•				•	81
UHP Healthcare for Seniors	UHP Healthcare for Seniors	25%	\$0.00	•					•			•			•	96
	UHP Healthcare for Seniors	8%	\$2.37	•					•			•			•	96
	UHP Healthcare for Seniors	4%	\$6.77	•								•			•	96
Universal Care Health Advantage	Universal Care Health Advantage	25%	\$0.00	•							•	•			•	94
	Universal Care Health Advantage	8%	\$0.00	•							•	•			•	94
	Universal Care Health Advantage	10%	\$0.00	•							•	•			•	94
	Universal Care Health Advantage	2%	\$0.00	•							•	•			•	94
	Universal Care Health Advantage	2%	\$22.00	•							•	•			•	94
	Universal Care Health Advantage Medi Medi	47%	\$23.25	•							•				•	94
	Universal Care Health Advantage SMI Plan	47%	\$23.25	•							•				•	94
Western Health Advantage	WHA Care+	6%	\$28.10	•					•			•	•		•	97